ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

St. Mary Medical Center Hobart

City: Hobart   County: Lake   Year: **2003**

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description	**Number of Set Up Beds**	**Number of Discharges**	**Number of Patient Days**	**Average Charge Per Discharge**
Burn Care	0	0	0	$0
Cardiac Intensive	0	0	0	$0
ICU Med/Surg	12	204	3,000	$12,299
ICU Neonatal	0	0	0	$0
ICU Pediatric	0	0	0	$0
Medical/Surgical	140	6,777	32,822	$1,968
Neonatal Intermed	0	0	0	$0
Obstetrics	10	436	1,071	$2,487
Pediatric	9	343	623	$838

Psychiatric	0	0	0	$0
Rehabilitation	0	0	0	$0
Substance Abuse	0	0	0	$0
Swing Beds	NA	0	0	$0
Other Services	30	975	6,322	NA
Acute Subtotal	201	8,735	43,838	NA
Normal Newborn	10	426	870	$6

II. Outpatient Visits			
Circulatory System	5,799	Digestive System	2,252
Endocrine System	6,963	Injuries and Poison	8,786
Mental Disorder	500	Musculoskeletal	8,435
Neoplasms	2,642	Nervous	1,851
Respiratory	3,764	Urinary	5,828
Other/Unknown	16,909	Total Visits	63,729
Number of Visits to Emergency Department			20,783
Percent of Emergency Department Visits of Total Visits			32.6%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

Y - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
Y - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	Y - Home Care Program	N - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	Y - Long Term Care Unit	N - Neonatal Nursery
Y - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	Y - Open Heart Surgery	Y - Operating Room
N - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
N - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
N - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported

Health Care Regulatory Services   2003 Hospital Services Main Page